

DECLARATION (37 CFR 1.53) FOR UTILITY OR  
DESIGN PATENT APPLICATION  
USING AN  
APPLICATION DATA SHEET (37 C.F.R. § 1.76)

Rec'd PCT/PTO 06 JUN 2005

10/537642

Attorney Docket Number

EPI-103X

First Named Inventor

Alessandro Sette

COMPLETE IF KNOWN

Application Number

Filing Date

June 6, 2005

Group Art Unit

Examiner Name

This declaration is directed to an application entitled: **Plasmodium Falciparum Antigens and Methods of Use.**  
As the below named inventor(s), I/we declare that:

This declaration is directed to:

The attached application, or

Application No. \_\_\_\_\_, filed on \_\_\_\_\_  
as amended on \_\_\_\_\_ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code §119 and/or §365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Application Serial No.	Country	Filing Date	Priority Claimed	
			Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and may jeopardize the validity of the application or any patent issuing thereon.

Full Name(s) of Inventors

Inventor One: Alessandro Sette

Citizen of: IT

Signature: \_\_\_\_\_

Inventor Two: Denise L. Doolan

Citizen of: AU

Signature: \_\_\_\_\_

Inventor Three: Daniel J. Carucci

Citizen of: US

Signature: \_\_\_\_\_

☒ Additional inventors are being named on the 1 additional forms attached hereto.

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EPI-103X

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Alessandro Sette

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Full Name(s) of Inventors

Inventor Four: John Sidney

Citizen of: US

Signature:

Inventor Five: Scott Southwood

Citizen of: US

Signature:



Additional inventors are being named on the 1 additional forms attached hereto.

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

<b>Application Number</b>	
<b>Filing Date</b>	June 6, 2005
<b>First Named Inventor</b>	Alessandro Sette
<b>Title</b>	Plasmodium Falciparum ...
<b>Art Unit</b>	
<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	EPI-103X

I hereby appoint:

☒ Practitioners associated with the Customer Number:

23557

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

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State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name Alessandro Sette

Signature

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 5 forms are submitted.

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June 6, 2005

**First Named Inventor**

Alessandro Sette

**Title**

Plasmodium Falciparum ...

**Art Unit****Examiner Name****Attorney Docket Number**

EPI-103X

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**SIGNATURE of Applicant or Assignee of Record**

Name

Denise L. Doolan

Signature

Date

Telephone

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**SIGNATURE of Applicant or Assignee of Record**

Name	Daniel J. Carucci		
Signature			
Date		Telephone	

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Name John Sidney

Signature

Date

Telephone

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Name

Scott Southwood

Signature

Date

Telephone

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